



Catherine B. Templeton, Director

*Promoting and protecting the health of the public and the environment*

Dear Parents/Guardians:

Beginning with this school year (2013-2014), Section 44-29-180 of the South Carolina Code of Laws, and State Regulation 61-8, requires that all students entering seventh grade receive one (1) dose of Tdap vaccine (tetanus, diphtheria, and pertussis). To assist parents of rising seventh graders with this vaccination requirement ahead of the 2014-2015 school year, the South Carolina Department of Health and Environmental Control (DHEC) is working with the VaxCare Corporation and your school district to provide Tdap vaccine to current sixth graders.

For your convenience, Tdap vaccine will be provided at no cost or low cost:

- If your child is covered by Medicaid, there is no charge for the vaccine.
- If your child has private health insurance that covers Tdap vaccine, VaxCare will bill your insurance.
- If you do not have any health insurance or if your insurance company does not pay for the Tdap vaccine, you will receive a bill from VaxCare or DHEC. You will not be charged more than \$50.00 for the shot.
- Please visit the DHEC website at <http://www.scdhec.gov/scimmunize> for more information regarding school-located vaccination clinics. Privacy notices for both DHEC and VaxCare are available for your review on the website.

**If you would like to have your child vaccinated at school, please do the following:**

1. Read the Vaccine Information Statement (VIS) regarding the Tdap vaccine. The VIS is available at <http://www.scdhec.gov/scimmunize>. If you need a paper copy or are unable to download from our website, please contact Jan Blackwell, RN, BSN, at 803-320-2467 or email at [blackwjb@dhec.sc.gov](mailto:blackwjb@dhec.sc.gov).
2. Fill out the front and back of the Parent/Guardian Consent Form (please print and use black ink only). The health questions on the form will help us decide if your child is able to get the Tdap shot. **Do not fill out the consent form if you do not want your child to receive the Tdap vaccine at school.**
3. Return the Consent Form to the school within five (5) days of receiving this letter. **The completed Consent Form must be received by the school at least 2 weeks prior to the assigned vaccination clinic date.**
4. **IMPORTANT:** After returning the consent, you must contact Jan Blackwell, RN, BSN, at 803-320-2467 or email at [blackwjb@dhec.sc.gov](mailto:blackwjb@dhec.sc.gov) prior to the assigned vaccination clinic date for your child's school **IF**:
  - There are any significant changes in your child's health.
  - You decide you no longer want your child to receive the Tdap vaccine at school.

Vaccination is the best protection against vaccine-preventable diseases. Let us help you keep your child healthy.

Sincerely,

Nicholas Davidson  
Public Health Director, Midlands Region